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04/11/2005

DYKAS, SHAVER & NIPPER, LLP
 THE HOFF BUILDING
 802 West Bannock St., Suite 405
 P.O. Box 877
 Boise, ID 83701-0877

06/27/2005 MBERHE1 00000098 10643522

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Sueann H. Yorita	(Depositor's name)
<i>Sueann H. Yorita</i>	(Signature)
June 22, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/643,522	08/18/2003	George H. Henderson	REGV101	4465

TITLE OF INVENTION: MAGNETIC SHOULDER STRAP RETAINER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	07/11/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
PATEL, TAJASH D	3765	002-310000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Derek H. Maughan2 Dykas, Shaver & Nipper

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Regency Ventures, Inc.

Nampa, ID

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Date June 22, 2005

Typed or printed name

Derek H. MaughanRegistration No. 52,007

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity)

(37 C.F.R. 1.31)

Docket No.
REGV101

Applicant(s): GEORGE HENDERSON

Application No.
10/643,522Filing Date
08/18/2003Examiner
PATENT, TAJASH D.Customer No.
21,658Group Art Unit
3765Confirmation No.
4465

Invention: MAGNETIC SHOULDER STRAP RETAINER

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Transmitted herewith are the following for the above-identified application.

☒ Issue Fee Transmittal Form PTOL-85☒ Utility Fee: \$ 700.00☐ Design Fee: _____☐ Plant Fee: _____☒ Publication Fee: \$ 300.00☒ A check in the amount of \$1,000.00 is attached.☐ The Director is hereby authorized to charge and credit Deposit Account No. _____ as described below.☐ Charge the amount of _____☐ Credit any overpayment. _____☐ Charge any additional fee required. _____☐ Payment by credit card. Form PTO-2038 is attached.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

Dated: JUNE 22, 2004

Signature

DEREK H. MAUGHAN
DYKAS, SHAVER & NIPPER, LLP
PO BOX 877
BOISE, ID 83701-0877
(208) 345-1122
REG. NO. 52,007

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JUNE 22, 2005

(Date)

Signature of Person Mailing Correspondence

SUEZANN H. YORITA

Typed or Printed Name of Person Mailing Correspondence